Case 20-13888-amc Doc 87 Filed 11/02/22 Entered 11/02/22 09:34:33 Desc Mair Document Page 1 of 6

Fill in this inforr	mation to identify	y your case:					
Debtor 1	Jesse		Davis				
	First Name	Middle Name	Last Name	Che	ck if this is:		
Debtor 2	Ebony		Davis		An amended filing		
(Spouse, if filing)	First Name	Middle Name	Last Name	— ☑	An amended liling		
United States Bankruptcy Court for the: EASTERN DIST. OF PENNSYLVANIA					A supplement showing postpetition chapter 13 income as of the following dat		
Case number	2020-13888				chapter 13 income as of the following date.		
(if known)					MM / DD / YYYY		
					WIWI, DD / TTTT		

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1:	Describe Empl	oyment							
1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers.		tion. ve more than one	Employment status	Debtor 1 mployment status ☐ Employed				Debtor 2 or non-filing spouse ✓ Employed		
		rmation about	0	✓ Not employed				Not employed		
Include part-time, seasonal,		· · · · · · · · · · · · · · · · · · ·	Occupation	Program Manager			Sr. Business Analyst			
O		Employer's name	Lockheed Martin			Covation.				
	Occupation may include student or homemaker, if it applies.		Employer's address	PO Bo Number	x 33003 Street			Number Street	rossing	
				Lakela	nd	FL	33807-300		DE	19713
			How long employed th	City here?	20 years	State	Zip Code	6 mos.	State	Zip Code —

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$13,455.00	\$7,150.00
3.	Estimate and list monthly overtime pay.	3. +	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$13,455.00	\$7,150.00

Case 20-13888-amc Doc 87 Filed 11/02/22 Entered 11/02/22 09:34:33 Desc Mair Document Page 2 of 6

Debtor 1 **Jesse Davis** Debtor 2 **Ebony Davis** Case number (if known) 2020-13888 For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 4 \$13,455.00 \$7,150.00 List all payroll deductions: \$3,451.54 \$1,799.74 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. 5c. \$1.068.12 \$214.54 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. \$265.61 \$429.10 \$330.36 \$28.80 5e. Insurance 5e. 5f. \$0.00 \$0.00 5f. Domestic support obligations 5q. Union dues 5g \$0.00 \$0.00 5h. Other deductions. 5h. + \$870.44 \$0.00 Specify: See continuation sheet Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. \$5,986.07 \$2,472.18 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$7,468.93 \$4,677.82 List all other income regularly received: 8a. 8a. Net income from rental property and from operating a \$0.00 \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a 8c. \$0.00 \$0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation hß \$0.00 \$0.00 8e. Social Security 8e \$0.00 \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: \$0.00 \$0.00 8g. 8g. Pension or retirement income \$0.00 \$0.00 Other monthly income. Specify: 8h. -\$0.00 \$0.00 Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$0.00 \$0.00 10. Calculate monthly income. Add line 7 + line 9. \$7,468.93 \$4,677.82 \$12,146.75 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$12,146.75 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? **√** No. None. Yes. Explain:

Debtor 1 Jesse Davis
Debtor 2 Ebony Davis

tor 2 **Ebony Davis** Case number (if known) **2020-13888**

	For Debtor 1	For Debtor 2 or non-filing spouse
. Other Payroll Deductions (details) PA Sadsbury TWP Withholding	\$89.84	
PA Sadsbury TWP Local Svc. Tax	\$4.00	
PA Unemployment EE	\$7.74	
HSA	\$433.33	
EE Special Accident	\$27.09	
Spouse Special Accident	\$13.90	
ARAG Legal Insurance	\$19.56	
Info Armor ID Theft	\$17.80	
Long term Disability	\$25.89	
Dep Opt'l Term Life- Spouse	\$9.93_	
EE Group Universal Life	\$6.76	
GUL Cash ACc Fund EE	<u>\$100.00</u>	
Accient Insurance	\$29.71_	
Critical Illness	\$33.68	
Hospital Indemnity	\$51.21	
Totals:	\$870.44	\$0.00

Official Form 106l Schedule I: Your Income page 3

Case 20-13888-amc Doc 87 Filed 11/02/22 Entered 11/02/22 09:34:33 Desc Main Document Page 4 of 6

i	ill in this inform	nation to identi	fy your case:			Che	ck if this	is:	
	Debtor 1	Jesse First Name	Middle Name	Davis			An ame	nded filing	
	Debtor 2		Middle Name					ement showing 13 expenses as	
	(Spouse, if filing)	Ebony First Name	Middle Name	Davis Last Na			followin	g date:	
	United States Bankr	uptcy Court for the	EASTERN DIST. O	F PENI	NSYLVANIA		MM / DI	D / YYYY	_
	Case number (if known)	2020-13888							
O	fficial Form 10	16J				J			
	chedule J: Yo		S						12/15
СО	rrect information. If	f more space is ne	le. If two married peopleded, attach another slower every question.						
:	Part 1: Descri	be Your House	ehold						
1.	Is this a joint case	e?							
	No	ebtor 2 live in a s	eparate household? le Official Form 106J-2, E	xpense	s for Separate Housel	hold of	Debtor 2	2.	
2.	Do you have depe	endents?	No	_4:	Dependent's relation	onshir	o to	Dependent's	Does dependent
	Do not list Debtor 1 Debtor 2.	1 and \square	Yes. Fill out this inform for each dependent		Dobtor 1 or Dobtor			age	live with you?
	Do not state the de names.	ependents'							Yes No Yes No Yes No No No
3.	Do your expenses		☑ No						Yes No Yes
	yourself and your		Yes						
			ing Monthly Expens						
to		of a date after the	kruptcy filing date unles bankruptcy is filed. If						
			h government assistand n Schedule I: Your Incor	•				Your expens	es
4.			enses for your residenc any rent for the ground o				4		\$1,692.00
	If not included in	line 4:							
	4a. Real estate ta	axes					4	a	
	4b. Property, hom	neowner's, or rente	r's insurance				4	b	\$31.00
	4c. Home mainte	nance, repair, and	upkeep expenses				4	·c	
	4d. Homeowner's	association or cor	ndominium dues				4	d.	

Case 20-13888-amc Doc 87 Filed 11/02/22 Entered 11/02/22 09:34:33 Desc Main Document Page 5 of 6

Debtor 1 Jesse Davis
Debtor 2 Ebony Davis

Case number (if known) 2020-13888 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans 5. 6. **Utilities:** 6a. Electricity, heat, natural gas 6a. \$400.00 6b. Water, sewer, garbage collection 6b. \$50.00 Telephone, cell phone, Internet, satellite, and 6c. \$150.00 cable services 6d. Other. Specify: Mobil phones 6d. \$450.00 Food and housekeeping supplies 7. \$700.00 Childcare and children's education costs 8. 8. Clothing, laundry, and dry cleaning 9. \$140.00 Personal care products and services 10. \$150.00 11. Medical and dental expenses 11. \$150.00 Transportation. Include gas, maintenance, bus or train 12. \$420.00 fare. Do not include car payments. 13. 13. Entertainment, clubs, recreation, newspapers, \$200.00 magazines, and books 14. Charitable contributions and religious donations 14. \$200.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. 15c. Vehicle insurance 15c. \$400.00 15d. Other insurance. Specify: 15d. 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$663.00 17b. Car payments for Vehicle 2 17b. \$684.00 17c. Other. Specify: Storage 17c. \$218.00 17d. Other. Specify: 17d. 18. 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19.

Case 20-13888-amc Doc 87 Filed 11/02/22 Entered 11/02/22 09:34:33 Desc Main Page 6 of 6 Document Debtor 1 Jesse Davis Debtor 2 **Ebony Davis** Case number (if known) 2020-13888 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. 20b. Real estate taxes 20b. 20c. Property, homeowner's, or renter's insurance 20c. 20d. Maintenance, repair, and upkeep expenses 20d. Homeowner's association or condominium dues 20e. 20e. 21. Other. Specify: 21. 22. Calculate your monthly expenses. 22a. Add lines 4 through 21. 22a. \$6,698.00 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. \$6,698.00 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$12,146.75 23b. Copy your monthly expenses from line 22c above. 23b. \$6,698.00 Subtract your monthly expenses from your monthly income. \$5,448.75 The result is your monthly net income. 23c For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

abla	No.	
	Yes.	Explain here: None.
		None.